DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK



# CITY OF PORTLAND BUILDING PERMIT



This is to certify that Kate Hebold

Located At 81 MARKET ST

Job ID: 2012-04-3754-SIGN

CBL: 028- K-001-001

has permission to erect a sidewalk sign

provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statues of Maine and of the Ordinances of the City of Portland regulating the construction, maintenance and use of the buildings and structures, and of the application on file in the department.

Notification of inspection and written permission procured before this building or part thereof is lathed or otherwise closed-in. 48 HOUR NOTICE IS REQUIRED. A final inspection must be completed by owner before this building or part thereof is occupied. If a certificate of occupancy is required, it must be

N/A

**Fire Prevention Officer** 

Code Enforcement Officer / Plan Reviewer

THIS CARD MUST BE POSTED ON THE STREET SIDE OF THE PROPERTY PENALTY FOR REMOVING THIS CARD



## PORTLAND MAINE

Strengthening a Remarkable City, Building a Community for Life . www.portlandmaine.gov

Acting Director of Planning and Urban Development Gregory Mitchell

Job ID: 2012-04-3754-SIGN

Located At: 81 MARKET ST

CBL: 028- K-001-001

#### **Conditions of Approval:**

#### Zoning

1. All sidewalk signs shall be removed when the business is closed or while any snow or ice exists on the walkway within eight feet of the sign in any direction. All sidewalk signs shall be located near the curb rather than the building face. The sidewalk shall maintain a width of no less than 4 1/2 feet of unobstructed sidewalk width perpendicular to major flows. For a single tenant listing, the maximum width is 24 inches or less if needed for the 4.5 feet of unobstructed sidewalk width. The maximum height of a sidewalk sign is 40 inches to the top of the sign in place. The minimum height of a sidewalk sign is 30 inches to the top of the sign in place.

2. This permit is being approved on the basis of plans submitted especially including the revisions received on 4/17/12. Any deviations shall require a separate approval before starting that work.

### City of Portland, Maine - Building or Use Permit Application

389 Congress Street, 04101 Tel: (207) 874-8703, FAX: (207) 8716

Job No: 2012-04-3754-SIGN	Date Applied: 4/11/2012		CBL: 028- K-001-001				
Location of Construction: 81 MARKET ST	Owner Name: 85 MARKET ST, LLC		Owner Address: PO BOX 7225 PORTLAND, ME 0	4112		Phone:	
Business Name: Arcana – Kate Hebold	Contractor Name: lessee		Contractor Addre	Phone:			
Lessee/Buyer's Name:	Phone:		Permit Type: SIDWALK SIGN			Zone: B-3	
Past Use:	Proposed Use:  Same: retail & personal		Cost of Work:	CEO District:			
personal services	services – to erect a s		Fire Dept:	Approved Denied N/A		Inspection: Use Group: Type: Signature:	
			Pedestrian Activi	ties District (P.A.D.			
Permit Taken By: Gayle				Zoning Approva	al		
<ol> <li>This permit application of Applicant(s) from meeting Federal Rules.</li> <li>Building Permits do not septic or electrial work.</li> <li>Building permits are voit within six (6) months of False informatin may impermit and stop all work.</li> </ol>	include plumbing, id if work is not started the date of issuance. validate a building	Special Zo Shorelar Wetland Flood Zo Subdivis Site Plar Maj Date: CERTIF	sone sion	Zoning Appeal  Variance  Miscellaneous  Conditional Use  Interpretation  Approved  Denied  Date:	Not in Di Does not Requires Approved		
•	record of the named property, nis authorized agent and I agree	CERTIF or that the prope to conform to	all applicable laws of the	Date:  I by the owner of record anis jurisdiction. In addition	Date:	ork described i	

to enforce the provision of the code(s) applicable to such permit.

SIGNATURE OF APPLICANT	ADDRESS	DATE	PHONE

## Signage/Awning Permit Application

If you or the property owner owes real estate or personal property taxes or user charges on any property within the City, payment arrangements must be made before permits of any kind are accepted.

Location/Address of Construction:	1 Market St.	10140
Tax Assessor's Chart, Block & Lot Chart# Block# Lot#	Owner: 85 Market St., LLC	Telephone:
638 K 001	The same state of the same sta	207.210.0911
Lessee/Buyer's Name (If Applicable)	Contractor name, address & telephor	e: Total s.f. of signage x \$2.00 Per s.f. plus \$30.00
Kate Hebold	NA	For H.D. signage \$75.00 Fee: \$
/		Awning Fee= cost of work Total Fee: \$
	L	
Who should we contact when the permit is ready	Knte thoold phon	e: 201-210-0911
Tenant/allocated building space frontage (feel Street width  Current Specific use:  If vacant, what was prior use:  Proposed Use:  Information on proposed sign(s):  Freestanding (e.g., pole) sign? Yes  Bldg. wall sign? (attached to bldg) Yes  Proposed awning? Yes No Is awn  Height of awning: Length of a	No Dimensions proposed:  No Dimensions proposed:  ning backlit? Yes No  ewning: Depth:	Signt theight = 12 ft.  Sign Dewall  Sign Height from grade:
Is there any communication, message, tradem: If yes, total s.f. of panels w/communications,	ark or symbol on it? Yes No _	s.f.
Information on existing and previously perm Freestanding (e.g., pole) sign? Yes Bldg. wall sign? (attached to bldg Yes Awning? Yes No Sq. st. area  A site sketch and building sketch showing ex	No Dimensions: No Dimensions: a of awning w/communication: ractly where existing and new signage	Dept. of Building Inspection City of Portland Maine ge is located must be provided.
Sketches and/or pictures of proposed signage	ge and existing building are also requ	nired.
Please submit all of the information of Failure to do so may result in the auto.  In order to be sure the City fully understands the additional information prior to the issuance of a Building Inspections office, room 315 City Hall of	e full scope of the project, the Planning permit. For further information visit us	and Development Department may request
I hereby certify that I am the Owner of record of the authorized by the owner to make this application as his a permit for work described in this application is issue areas covered by this permit at any reasonable hour to	s/her authorized agent. I agree to conform d, I certify that the Code Official's authoriz	to all applicable laws of this jurisdiction. In addition, if ed representative shall have the authority to enter all
Signature of applicant:		Date: 5.10.12

#### Marge Schmuckal - 81 Market St. side walk sign forms

From: Kate Hebold <arcanahealingarts@gmail.com>

To: <mes@portlandmaine.gov>

**Date:** 4/17/2012 2:08 PM

Subject: 81 Market St. side walk sign forms

Attachments: Form041720121035.PDF; Measures 24" x 36".jpg

Hi there Marge,

Thanks again for getting back to me today and for allowing me to simply send these documents via email. Attached is a picture of the same side walk sign as before, except that the dimensions are 24" x 36". Also, the form (with the ambiguous title) is a copy of an insurance certificate listing the city as an additional insured.

Please let me know if you received this email and find my information acceptable.

Thank you kindly, Kate Hebold





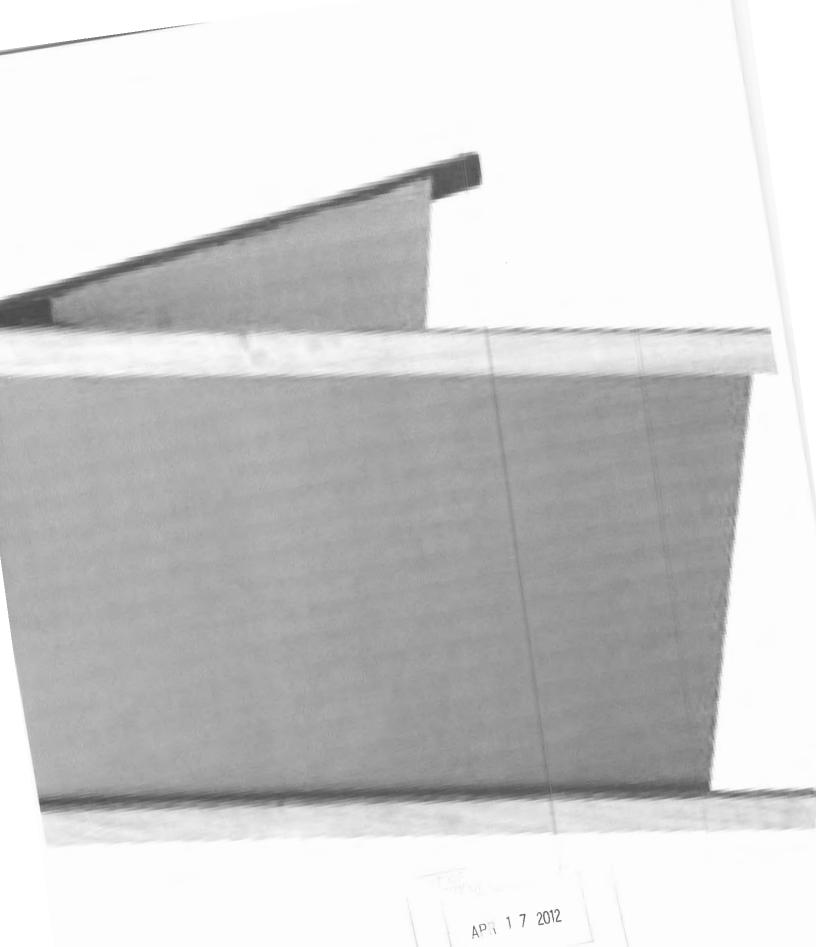
### **CERTIFICATE OF LIABILITY INSURANCE**

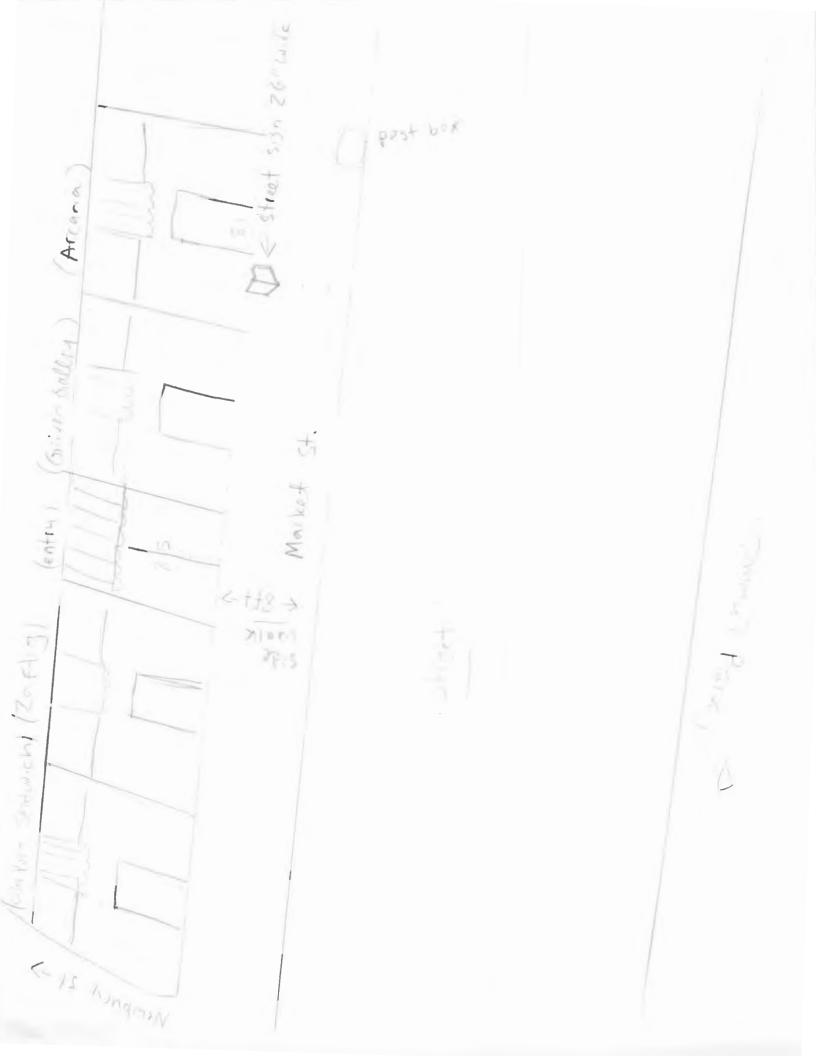
DATE (MM/DD/YYYY) 4/17/2012

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to

	ne terms and conditions o ertificate holder in lieu of :					quire :	an endors	sement. A sta	atement on the	nis certificate does not d	:onfe	r rights to the	
PRO	DUCER					-	CONT	ACT Meliss	a W				
GH	GHM Agency & BRM Associates LLC					PHONE (A/C, No, Ext): (207) 873-5101 FAX (A/C, No, Ext): (207) 873-5784							
	Main Street						E-MA	ESS: meliss	aw@ghmage	DCV. COM			
	O. Box 649						PROL	OUCER OMER ID #:0002	22563				
	terville	ME 04	003	-06	40		CUST					NAIC#	
	RED	ME U4	903	-00	49			insurer(s) affording coverage insurer a MMG Insurance Co.					
11404	INEU								nsurance	Co.		15997	
Ar	cana LLC						INSU	RER B :					
	Market St						INSU	RER C :					
OI	Market St						INSU	RER D :					
Do	rtland	ME 04	101				INSU	INSURER E:					
			-				INSU	INSURER F:					
	VERAGES		-		NUMBER:					REVISION NUMBER:			
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INSR	TYPE OF INSURANCE	E		SUBR	POLICY	NUMB	ER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	3		
	GENERAL LIABILITY									EACH OCCURRENCE	\$	1,000,000	
	X COMMERCIAL GENERAL LI	ABILITY								DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	50,000	
A	CLAIMS-MADE X	OCCUR	X		BP 0442835			2/29/2012	2/28/2013	MED EXP (Any one person)	\$	10,000	
										PERSONAL & ADV INJURY	\$	1,000,000	
				1						GENERAL AGGREGATE	\$	2,000,000	
	GEN'L AGGREGATE LIMIT APPLI	ES PER:								PRODUCTS - COMP/OP AGG	s	2,000,000	
	AUTOMOBILE LIABILITY	Loc								COMBINED SINGLE LIMIT (Ea accident)	\$		
	ANY AUTO									BODILY INJURY (Per person)	\$		
	ALL OWNED AUTOS									BODILY INJURY (Per accident)			
	SCHEDULED AUTOS									PROPERTY DAMAGE			
	HIRED AUTOS									(Per accident)	\$		
	NON-OWNED AUTOS							1			\$		
											\$		
	UMBRELLA LIAB	OCCUR								EACH OCCURRENCE	s		
		CLAIMS-MADE								AGGREGATE	s		
	DEDUCTIBLE										s		
	RETENTION \$								yara =		s		
	WORKERS COMPENSATION									WC STATU- TORY LIMITS ER			
	AND EMPLOYERS' LIABILITY	CUTIVE Y/N								E.L. EACH ACCIDENT	s		
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under		N/A				API	7 7 201	2		-		
			///		T	E.L. DISEASE - EA EMPLOYEE	-						
_	DESCRIPTION OF OPERATIONS	below						-		E.L. DISEASE - POLICY LIMIT	2		
							-						
DES	CRIPTION OF OPERATIONS / LOCA	ATIONS / VEHIC	CLES (	Attach	ACORD 101, Additi	onal Re	marks Sche	fule, if more space	e ls réquired)				
CE	RTIFICATE HOLDER						CAP	CELLATION					
	City of Portla 389 Congress S Portland, ME	t, Room	31	5			TH AC	E EXPIRATIO	N DATE TH	DESCRIBED POLICIES BE C EREOF, NOTICE WILL CY PROVISIONS.			
							Lau	ra Rowe, 1	AAI/LAURA				







395 Fore Street P.O. Box 7225 Portland, ME 04112 Tel: (207) 772-6579 Fax: (207) 773-0680

April 10, 2012

City of Portland 389 Congress Street Portland, Maine 04101

To Whom It May Concern;

Please be advised that H. H. Sawyer Realty Company, owner of 81 Market Street, gives permission to Kate Hebold, owner of the business Arcana, to place signage on the sidewalk in front of 81 Market, Portland, Maine.

Please contact the office if you have any questions or concerns regarding this matter.

Sincerely,

Cathy-Ann Wirth

H.H. Sawyer Realty Company & Daughters



### CERTIFICATE OF LIABILITY INSURANCE

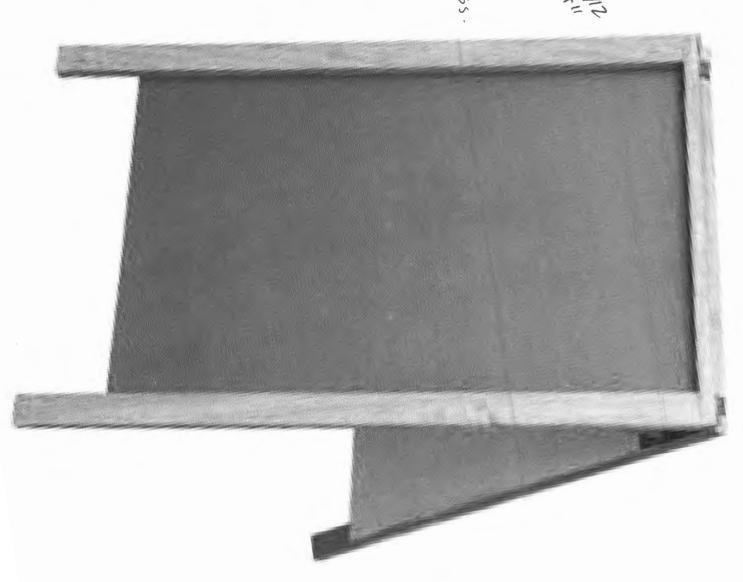
DATE (MM/DD/YYYY) 2/29/2012

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to

the terms and conditions of the policy certificate holder in lieu of such endor					his certificate does not o	onfer rights	s to the
PRODUCER			CONTACT Melis	sa W			
GHM Agency & BRM Associate	PHONE (A/C, No. Ext): (207) 873-5101 FAX (A/C, No.): (207) 873-5784						
51 Main Street			E-MAIL ADDRESS: melis	saw@ghmage	ncv.com		
P.O. Box 649			PRODUCER CUSTOMER ID #:00	022563	7		
	1002-06	40	1			Ţ.	
Waterville ME 04	1903-06	49			RDING COVERAGE		NAIC #
INSURED			INSURER A MMG	Insurance	Co.	159	97
N 770			INSURER B:				
Arcana LLC			INSURER C :				
81 Market St			INSURER D:				
			INSURER E :				
Portland ME 04	1101		INSURER F :				
COVERAGES CER	RTIFICATE	NUMBER:12/13/ Mas	ster		REVISION NUMBER:		
THIS IS TO CERTIFY THAT THE POLICIE: INDICATED. NOTWITHSTANDING ANY R CERTIFICATE MAY BE ISSUED OR MAY EXCLUSIONS AND CONDITIONS OF SUCHINSR	PERTAIN, POLICIES	NT, TERM OR CONDITION THE INSURANCE AFFORD LIMITS SHOWN MAY HAVE	OF ANY CONTRA ED BY THE POLI BEEN REDUCED	CT OR OTHER	DOCUMENT WITH RESPECT TO S.	O ALL THE	CH THIS
LTR TYPE OF INSURANCE	INSR WVD	POLICY NUMBER	(MM/DD/YY)	Y) (MM/DD/YYYY)			
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X COMMERCIAL GENERAL LIABILITY					PREMISES (Ea occurrence)	\$	50,000
A CLAIMS-MADE X OCCUR		тва	2/29/201	2 2/28/2013	MED EXP (Any one person)	\$	10,000
					PERSONAL & ADV INJURY	\$ 1,0	000,000
					GENERAL AGGREGATE	\$ 2,0	000,000
GEN'L AGGREGATE LIMIT APPLIES PER:  X POLICY PRO- PRO- LOC					PRODUCTS - COMP/OP AGG	s 2,0	000,000
AUTOMOBILE LIABILITY					COMBINED SINGLE LIMIT (Ea accident)	\$	
ANY AUTO					BODILY INJURY (Per person)	\$	
ALL OWNED AUTOS							
SCHEDULED AUTOS					BODILY INJURY (Per accident)	\$	
HIRED AUTOS					PROPERTY DAMAGE (Per accident)	\$	
NON-OWNED AUTOS						\$	
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OCCOR.					EACH OCCURRENCE	\$	
CEAMOTALE	=				AGGREGATE	\$	
DEDUCTIBLE						\$	
RETENTION \$				-	WC STATU OTH	\$	
WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y/N					WC STATU- OTH- TORY LIMITS ER		
ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?	N/A				E.L. EACH ACCIDENT	\$	
(Mandatory in NH)					E.L. DISEASE - EA EMPLOYEE	\$	
If yes, describe under DESCRIPTION OF OPERATIONS below					E.L. DISEASE - POLICY LIMIT	\$	
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHI	CLES (Attach	I. ACORD 101, Additional Remarks	s Schedule, if more sp	ace is required)			
CERTIFICATE HOLDER			CANCELLATIO	N			
H. H. Sawyer Realty C PO Box 7225 Portland, ME 04112	Company	& Daughters	THE EXPIRAT	ION DATE TH WITH THE POLI	DESCRIBED POLICIES BE C EREOF, NOTICE WILL I CY PROVISIONS.		

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## PORTLAND MAINE

Strengthening a Remarkable City, Building a Community for Life . www.portlandmaine.gov

#### Receipts Details:

Tender Information: Check, BusinessName: visa, Check Number: 34257

Tender Amount: 26.00

Receipt Header:

Cashier Id: gguertin Receipt Date: 4/11/2012 Receipt Number: 42811

Receipt Details:

Referance ID:	6061	Fee Type:	BP-Signs - SW
Receipt Number:	0	Payment Date:	
Transaction Amount:	26.00	Charge Amount:	26.00

Job ID: Job ID: 2012-04-3754-SIGN - freestanding sidewalk sign 26" x 36"

Additional Comments: 81 Market

Thank You for your Payment!



### Sidewalk Signs Design, Location and Construction Standards

Quantity
One sign per establishment for each street frontage having a public entrance, provided that all dimension and location standards are met. When standards would not otherwise permit a sign, a sing may consist of multiple listings.
Sign Dimensions is Showing 26" - 4/17/12 charged + 24"
Single Listing: Maximum width is 24 inches or such lesser width sufficient to retain 4 ½ feet of unobstructed sidewalk width perpendicular to major flows. Maximum height is 40 inches to top of sign in place. Minimum height is 30 inches to top of sign in place.
Multiple Listings: Maximum width is 30 inches or such lesser width sufficient to retain 4 ½ feet of unobstructed sidewalk width perpendicular to major flows. Maximum height is 40 inches to top of sign in place. Minimum height is 30 inches to top of sign in place.
Location
Minimum distance between signs is 20 feet. Maximum distance of sign from public entrance of advertiser is 20 feet. The City may vary these distances for exceptional physical circumstances where public safety and streetscape aesthetics will be maintained. However, under no circumstances shall signs obstruct vehicular stops, benches, fire hydrants or other street visual amenities. Signs shall be located near the curb rather than the building face.
Materials and Graphics
All signs shall be of an A-frame type design, shall be constructed of durable, weather-resistant materials and finish, shall have no moving parts and shall be non-electrified. All signs shall be maintained in a clean and original appearance. Sign materials, graphics and finish shall be of a unified design and shall be compatible with the local streetscape. All signs shall have horizontal braces spanning each side of the sign to assure rigid support. Lettering shall be legible and consistent.
Sign Removal
All signs shall be removed when the business is closed or while any snow or ice exists on the walk within eight feet of the sign in any direction.
Insurance 4/7/12 of
No permit shall be issued unless the applicant has posted in advance with the City a Certificate of Liability listing the City as additional insured in the amount of \$400,000.00.
Enforcement
If the sign does not conform to the standards outlined, the permit may be revoked and once the owner has been notified, the sign could be removed.
To apply for a sign permit, stop by the Inspections Division, Portland City Hall, 389 Congress Street, room 315 with:
<ul> <li>□ Certificate of liability insurance</li> <li>□ Drawing of sign showing dimensions and design work</li> <li>□ Payment of fees: \$30.00 plus \$2.00 per s.f. of signage</li> <li>□ Complete application with pre-application questionnaire and checklist complete</li> </ul>